

**LEGISLATIVE SERVICES AGENCY
OFFICE OF FISCAL AND MANAGEMENT ANALYSIS**

200 W. Washington, Suite 301
Indianapolis, IN 46204
(317) 233-0696
<http://www.in.gov/legislative>

FISCAL IMPACT STATEMENT

LS 6923

BILL NUMBER: SB 415

NOTE PREPARED: Jan 4, 2013

BILL AMENDED:

SUBJECT: Department of Health Matters.

FIRST AUTHOR: Sen. Miller Patricia

FIRST SPONSOR:

BILL STATUS: As Introduced

FUNDS AFFECTED: **GENERAL**
 X DEDICATED
 FEDERAL

IMPACT: State & Local

Summary of Legislation: This bill requires local boards of health to apply to the Indiana State Department of Health (ISDH) for funding from the Indiana Local Health Department Account (Account). The bill specifies that the ISDH will distribute funds from the Account. (Current law provides that the Auditor of State distributes the funds.) It also directs distribution of the payments to the local boards of health. (Current law provides that the funds are distributed to the counties.)

Beginning January 1, 2014, the bill requires certain providers to report immunization data to the immunization data registry within 72 hours after giving an immunization, and allows for disciplinary sanctions for failure to report immunizations to the registry. (Under current law, reporting is voluntary.)

Effective Date: July 1, 2013.

Explanation of State Expenditures: *Indiana Local Health Department Account Provisions-* The bill will transfer responsibility for distributing funds from the Local Health Department Account from the Auditor of State to the ISDH. This provision would have minimal impact on either agency.

The bill requires the ISDH to design an application for the local health departments' use in applying for the funding. It also would require the ISDH to review and approve the use of the funds proposed in the application. The ISDH should be able to perform these tasks within the current level of resources available.

Children and Hoosiers Immunization and Registry Program (CHIRP) Provisions-

Indiana Professional Licensing Agency (IPLA): Effective January 1, 2014, a licensed provider who administers immunizations would be required to report immunization data to the CHIRP within 72 hours unless a patient or a parent or guardian of a patient under the age of 18 has completed and filed an exemption form. Providers who recklessly violate or fail to comply with the reporting requirement are subject to professional sanctions. The appropriate professional licensing board would be required to hold hearings and could potentially sanction providers. The impact on the number of hearings required of the professional licensing boards would likely be small.

Rules: Current Board of Pharmacy rules allow pharmacists to report immunizations to the CHIRP and would require modification to require the use of the CHIRP. The required revision should be able to be accomplished within the current level of resources available to the IPLA and the Board of Pharmacy.

Explanation of State Revenues: *CHIRP Provisions:* The bill provides that practitioners who recklessly violate or fail to report immunization data to the CHIRP are subject to professional sanctions, which may include a fine not to exceed \$1,000 per violation. State revenue would increase to the extent that violations are discovered, practitioners sanctioned, and fines are collected. The increase in state revenue would likely be small.

Explanation of Local Expenditures: Local health departments would be required to apply for the distribution before October 1 of each year.

Explanation of Local Revenues: *Indiana Local Health Department Account Provisions-* The bill requires the ISDH to make the distribution to local boards of health. (Current law requires the distribution go to the counties.) ISDH is required to allocate the available funds to each local health department that has submitted an application and that has been approved by ISDH. Since the allocation formula has not changed, the amount of money designated for each county would not change. However, if a local health department did not apply for, or have an approved application, no distribution would be made for that county.

Lake County: The bill does not change the allocation formula on a county basis but it could potentially affect the distribution of funds within Lake County, which includes more than one local health department (Lake County, East Chicago, and Gary). The bill requires ISDH to distribute the allocation for Lake County to the department or departments with approved applications. If all three Lake County health departments have approved applications, ISDH is to allocate the available funds on the basis of population served by each. (Under current law, the county fiscal body determines the allocation of the funds within the county.)

State Agencies Affected: ISDH; IPLA, Board of Pharmacy; Auditor of State.

Local Agencies Affected: Counties and local departments of health.

Information Sources:

Fiscal Analyst: Kathy Norris, 317-234-1360.